	PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004										Application or Docket Numbe						
	ļ											10/565034					
CLAIMS AS FILED - PART I															THAN		
U.S. NATIONAL STAGE FEES					(1	Column 1)	(Column 2)			TYPE		OR		SMALL ENTIT			
						·				RATE			RA	TE	FE		
	BASIC FEE				SMALL ENT. = \$ 150		LARGE ENT	= \$ 300	\$ 300 BASIC FEE			OR	BASIC F	EΕ	21		
	EXAMINATION FEE				Satisfies PCT Article 33(1)- (4) = \$50 / \$100		All other situal \$ 100 / \$ 2		EXAM FEE			1	EXAM, FI	EE .	17		
	SEARCH FEE				ALL oth	A = \$50/\$100 er countries = 00/\$400	All other situates \$ 250 / \$ 5		SEARC		1	SEARCH	6	X (1)			
1	FEE FOR EXTRA SPEC, PGS.					minus 100 =	/ 50 =		X\$ 1	25 =			X \$ 25	0-	100		
\vdash	TOTAL CHARGEABLE CLAIMS					minus 20 =	,		X \$ 2	25 =	<u>-</u>	OR	X \$ 50				
INDEPENDENT CLAIMS						minus 3 = .			X \$ 10	X \$ 100 =		OR	X \$ 200	X \$ 200 =			
М	ULTIPLE DE	PENDENT	CLAIM F	PRESE	NT				+\$ 18	30 =		OR	+ \$ 360				
•	If the difference in column 1 is less than zero, enter "0" in column 2											OR	TOTAL	-12	A)		
		CLAI	MS AS	S AMI	ENDE	D - PART II	ſ			4				1/ 1/	12.		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)										LL ENTIT	Υ (DR .	OTHE SMALL	R THA			
AMENDMENT A	CLAIMS REMAINING		1	HIGHEST NUMBER PRESENT			$\overline{\mathbf{I}}$			OI-			AD				
	Total		AFTER AMENDMENT		<u> </u>	PREVIOUSE PAID FOR			RATE		ONAL EEE		RATE	TIOI FE	VAL		
			-	Minus	· 	ļ <u>.</u>			X \$.25 =		.].0	R X	\$ 50 =	1			
	Independen			Minus			=		X \$ 100 =	X \$ 100 =		OR X\$2		200 =			
_	FIRST PRESENTATION OF MULTI				E DEPE	ENDENT CLAIN			+ \$ 180 =	+ \$ 180 =		+ \$	§ 360 =	360 =			
					*				TOTAL ADDO		ÖR		L ADOIT.	 	\exists		
				,	ŧ												
1		CLAII REMAIN			$\neg \neg$	HIGHEST MUMBER	(Column 3) PRESENT	7 1		ADÓI-	7	<u> </u>		ADDI-			
L		AFTE	R		- 1	PREVIOUSLY PAID FOR	EXTRA	П	RATE	TIONAL FEE		R/	ATE	TIONAL			
To	otal	•	N	linus	·	•	=		X \$ 25 =		OR	X\$:	50 =	<u> </u>	1		
ls.	Sependent	ndent • Minus		inus	***		=		X \$ 100 =		OR	X\$2	:00 =		7		
F	IRST PRES	HOITATION	OF MUL	TIPLE	DEPEN	DENT CLAIM			\$ 180 =		OR	+ \$ 360 =		·	7		
							TO		OTAL ADOIT. FEE			R TOTAL ADDIT			1		
															1		
(the	entry in only	10 1 k lace #	an the act	ovin eet	····· • ·· · ·	te Wiln column 3											
The	Trighest Num	iber Previousi	Y Pald For	" IN THE	S SPACE	is less than '20', is less than '20', e	enter "20"										
he *	Highest Humb	or Previously	Paid For	(Total or	o erace Independ	is icss than T, ea Sent) is the highes	nter "3". it number found in	the sp	propriate box in	column 1.				ı			
														- 1			

FORM PTO-676 (Rev. 02/2005)

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